Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECOI									A	pplication	or.D	ocket Nun	nber	
L	PATENT A	D .	(2100	alq	B7								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMA TYP		ENTITY	OR	OTHER SMALL		
FOR NUM				BER FILED NUMBE			EXTRA	RAT	E	FEE	1	RATE	FEE	
BASIC FEE									ŠŽ.	345.00	OR		690.00	
TOTAL CLAIMS			16	minus 20=		= *		X\$ 9)=		OR	X\$18=		
INDEPENDENT CLAIMS				minus 3 = *			•				OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								+130			1	+260=		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2								/= \L		OR	TOTAL	1050	
	CLAIMS AS AMENDED - PART II									L	OR		. V	
		(Col	umn 1)	(Column 2)			(Column 3)	SMALL ENTITY			OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A		REM Af	AIMS IAINING FTER NDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATI	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9	=		O.R	X\$18=		
	Independent *			Minus	***	T OL ALLA	=	X39=	=		OR	X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+130			OR	+260=		
								TOT	ΓAL			TOTAL		
		(Coli	umn 1)		(Colu	mn 2)	(Column 3)	ADDIT. F	EE			ADDIT. FEE		
AMENDMENT B		REM AF	AIMS AINING TER IDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9=	=		OR	X\$18=		
	Independent	*		Minus	***		=	X39=			OR	X78=		
	FIRST PRESE	NIAIIC	ON OF MU	JULIPLE DEF	PENDEN	TCLAIM		+130=				+260=		
				•				TOT			OR	TOTAL		
		(Cal	4\		(O-1:			ADDIT. FI	EE L		OR ,	ADDIT. FEE		
()		CL	umn 1) AIMS	(* 3	(Colu	IEST	(Column 3)		<u> </u>	ADDI-			4 D D I	
AMENDMENT C		AF	AINING TER IDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA	RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9=			OR	X\$18=		
	Independent	*		Minus	***		=	X39=	1			X78=		
_	FIRST PRESE	NTATIC	N OF ML	JLTIPLE DEF	PENDEN	T CLAIM		+130=	\dashv		OR	7/10-		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+260=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Num	ber Prev	iously Pai	d For" (Total or	Independ	ent) is the	highest number for	und in the	app	ropriate box	in coli	umn 1.		